

## **Integrated Care Initiative Implementation Advisory Council**

*October 17, 2016*

*Meeting Notes*

**Attending:** Jen Bowdoin, EOHHS; Dawn Allen, EOHHS; Diana Beaton, EOHHS; Holly Garvey, OHHS; Alison Buckser, EOHHS; Jen Duhamel, EOHHS; Kelly Lee, PACE; Sam Salganik, RIPIN; Alison Croke, NHPRI; Dianne Ross, Advocates in Action; Deanne Gagne, Advocates in Action; Nicholas Oliver, RIPHC; Jim Nyberg, Leading Age RI; Gretchen Bell, NHPRI; Rita Towers, NHPRI; Mary Ladd, DEA; Marjorie Waters, RI Organizing Project; Shena Hanel, Westbay CAP; Mike Walker, Leading Age RI; Rich Glucksman, BCBSRI; Kathy McKeon, Diocese of Providence; Pamela L. Sawin, Citrin Cooperman; Sheila DiVincenzo, Access Point RI

### **Welcome:**

- Alison Croke of NHPRI introduced a new NHPRI Member advocate named Rita Towers.

### **Updates on Enrollment and the MMP Enrollment Line**

- Jennifer Bowdoin presented a report on UNITY, INTEGRITY, and PACE enrollment. (Please see attached pdf entitled “Enrollment Report October 2016”.)
- Answers to questions raised about the report:
  - UNITY enrollment has been stable since February 2016.
  - Ms. Bowdoin reported that the seeming decline in INTEGRITY opt-out rates as compared to UNITY opt-out rates most likely has two causes—an actual decline in opt-outs as well as the fact that opt-out rates are being reported differently than in the past.
  - Initial INTEGRITY enrollment has been a little lower than expected since the population eligible for passive enrollment is smaller than was expected. This is due to the fact that more people have Medicare Advantage than expected. About half of the expected 1600 to 1700 for passive enrollment had Medicare Advantage.
  - Ms. Bowdoin will look into adding another column to the page 6 Active Enrollment by Month table to show the number of people who were sent enrollment letters.
  - EOHHS discovered a town code error that caused some people to come out of enrollment inappropriately and incorrectly identified some people as medically needy with LTSS.
  - In response to a question about whether there is a breakeven point to make it financially viable, Ms. Croke stated that NHPRI has one but she does not know it off hand. Right now, assuming a 40% opt-out rate, NHPRI is projecting a loss over the next three years, but expects after that to see stabilization and become financially viable. NHPRI’s other product lines in the meantime have revenues so in the short-term everything evens out. These NHPRI Medicaid products do not have an impact on the commercial premiums. Ms. Croke and Nicholas Oliver will discuss the possibility of how to market to FFS individuals who opted out of Unity.
  - In response to a question about if the State has a financial breakeven point regarding the MMP- EOHHS responded that they hope to see at least 10,000 people enrolled in INTEGRITY.

- Initially EOHHS had planned to do a quarterly enrollment process after the initial waves. Ms. Bowdoin is open to discussion about doing it more frequently.
- NHPRI does plan to bring providers who are not in network into the network.
- Ms. Croke will follow up on a participant's report that the NHPRI's member services incorrectly told an enrollee that doctors (who are actually in network) were not in network.
- There were questions about the impact of RI Bridges on the MMP. There does not seem to be any real impact on the MMP. A participant reported spending two hours on behalf of a client who lost her Medicaid; Ms. Bowdoin will follow up on this to try to resolve the specific issue and to see if something systemic is happening. Mr. Salganik said that people can also call the Ombudsman (RIPIN Healthcare Advocate).

### **ICI Ombudsman program (RIPIN Healthcare Advocate)**

- Sam Salganik gave an update on the RIPIN Ombudsman program. Initial training is now completed. RIPIN has just started outreach/marketing activities. Mr. Salganik handed out a draft of marketing materials that have been developed. The website is being developed. They are updating their data collection system so that starting November 1 they can collect and report the required call data.
- The Ombudsman program has two job openings: front-line call worker and a supervisor. Please share this information. RIPIN would ideally like to hire a dual eligible person for these positions.

### **ICI Implementation Council Update**

- Ms. Bowdoin reported that this group will be transitioned to a consumer-driven council. Two orientation sessions are being held for the consumer/family members. After the second one, the consumer/family members will be asked to confirm their membership. After they have confirmed, then their number will drive the number of advocate and provider members.
- Marjorie Waters spoke about the actual orientation sessions. Ongoing training will be provided to them to encourage an inquisitive culture.
- If anyone knows a consumer or family member who would be appropriate for the Council, please let Ms. Bowdoin know.
- Ms. Bowdoin expects that the location and time for this meeting may be changed to accommodate new consumer members. A different location may be less intimidating.
- A provider workgroup is being set up. An email about this was sent out to the Council. This will be a forum for providers to talk about their issues. Providers had asked for this to be set up. Another email blast will be sent out once the meeting has been scheduled.

### **Outreach activities**

- Ms. Bowdoin reported that provider office hours are being offered. One is held on the first Tuesday of the month via WebEx at 6pm. Another is held on the third Thursday of the month at 10am at Cranston Public Library. There is no set agenda, but providers can ask any questions they want.
- Diana Beaton reported that MMP materials have been hand-delivered to the large physician practices around the state.
- Ms. Croke reported that NHPRI provider outreach started in May. There will be two more provider outreach events in November and January. In addition, NHPRI has put together a

series of training presentations for community mental health centers—three different sets of content for the different types of staff at community mental health centers. NHPRI is still working on developing I/DD provider content. NHPRI is planning a breakfast for residential service coordinators; inviting all RSCs to that. NHPRI is also doing marketing activities at all adult day centers, nursing homes, and senior centers.

**PACE**

- Kelly Lee reported that as of October 1, 2016, 279 people were enrolled in PACE and that there is capacity in the Woonsocket location.
- There is not a capacity limit in PACE.

**Public Comment**

- None